

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SL		3-22-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A.T	1071	06/12/01
RESPONSE FORMALITY REVIEW	M.H	625	10-15-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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41	✓
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50	✓

Claim	Date
Final Original	
51	✓
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet her

(LEFT INSIDE)

BEST AVAILABLE COPY

H.S.
 6-13-01
 87
 10/10/01